



TRANSMITTAL FORM

Attorney Docket No.
FN010/2725CIPAF/26/2
\$Inventor application: **Eran STEINBERG**Confirmation No.: **3485****RECEIVED**Serial No: **09/313,131**Group Art Unit: **2612****JUL 02 2004**Filed: **May 17, 1999**Examiner: **Nguyen, Luong Trung****Technology Center 2600**For: **In Camera Messaging and Advertisement System**

ENCLOSURES (check all that apply)

<input type="checkbox"/>	Amendment/Reply	<input type="checkbox"/>	Assignment and Recordation Cover Sheet	<input type="checkbox"/>	After Allowance Communication to Group
<input type="checkbox"/>	After Final	<input type="checkbox"/>	Part B-Issue Fee Transmittal	<input type="checkbox"/>	Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/>	Information disclosure statement	<input type="checkbox"/>	Letter to Draftsman	<input checked="" type="checkbox"/>	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/>	Form 1449	<input type="checkbox"/>	Drawings	<input type="checkbox"/>	Status Letter
<input type="checkbox"/>	(X) Copies of References	<input type="checkbox"/>	Petition	<input checked="" type="checkbox"/>	Postcard
<input checked="" type="checkbox"/>	Extension of Time Request *	<input type="checkbox"/>	Fee Address Indication Form	<input type="checkbox"/>	Other Enclosure(s) (please identify below):
<input type="checkbox"/>	Express Abandonment	<input type="checkbox"/>	Terminal Disclaimer	06/30/2004 YPOLITE1 00000085 09313131 01 FC 1252 420.00 0P	
<input type="checkbox"/>	Certified Copy of Priority Doc	<input type="checkbox"/>	Power of Attorney and Revocation of Prior Powers		
<input type="checkbox"/>	Response to Incomplete Appln	<input type="checkbox"/>	Change of Correspondence Address		
<input type="checkbox"/>	Response to Missing Parts				
<input type="checkbox"/>	Executed Declaration by Inventor(s)	*Extension of Term: Pursuant to 37 CFR 1.136, Applicant petitions the Commissioner to extend the time for response for two month(s), from April 23, 2004 to June 23, 2004.			

CLAIMS

FOR	Claims Remaining After Amendment	Highest # of Claims Previously Paid For	Extra Claims	RATE	FEE
Total Claims	19	20	0	\$18.00	\$ 0.00
Independent Claims	2	3	0	\$86.00	\$ 0.00
				Total Fees	\$ 0.00

METHOD OF PAYMENT

<input checked="" type="checkbox"/>	Check no. 7605 in the amount of \$750.00 is enclosed for payment of fees (\$330-Notice of Appeal & \$420-Petition Extension of Time).
<input type="checkbox"/>	Charge \$ _____ to Deposit Account No. _____ (Account Holder Name) for payment of fees.
<input checked="" type="checkbox"/>	Charge any additional fees or credit any overpayment to Deposit Account No. 02-2120 (Sawyer Law Group LLP).

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Attorney Name	Stephen G. Sullivan, Reg. No. 38,329
Signature	
Date	June 22, 2004

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: **June 22, 2004**

Type or printed name	Jinny Nguyen
Signature	